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SEP 2 0 2004

PATENT

Fee Only

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of)	Examiner: Mark S. BLOUIN
)	
Gustafson et al.)	Art Unit: 2653
)	
For: SHOCK ISOLATION BEARINGS AND)	Confirmation No.: 4487
TRAVEL LIMIT GAPS IN A SPINDLE)	
MOTOR AND DISK DRIVE USING THE)	
SAME)	
)	
Serial No.: 09/846,054)	
)	
Filed: April 30, 2001)	**AMENDMENT**
)	
Atty. Docket No.: K35A0459)	

CERTIFICATE OF TRANSMISSION

I hereby certify that this document and the documents referred to herein are being transmitted by facsimile to the Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, fax number 703-872-9306 on September 20, 2004.

Nita J. Miller
Nita J. Miller

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

The present paper is responsive to the Office Action mailed May 27, 2004. Applicants respectfully request an extension of time for one month from August 27, 2004, to September 27, 2004. The Commissioner is hereby authorized to charge the fee due under 37 CFR §1.17(a)(1) (fee code 1251) in the amount of $110 to Deposit Account No. 23-1209, referencing Docket No. K35A0459. A duplicate copy of this sheet is attached.

Amendments to the claims may be found beginning at page 2 of this paper.

Remarks and arguments may be found beginning at page 17 of this paper.

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Serial No. 09/846,054
Atty. Docket No. K35A0459

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PATENT APPLICATION FEE DETERMINATION RECORD	Application or Docket Number
Effective October 1, 2003	09/846054

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20=	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		☐

SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASIC FEE	375.00	OR	BASIC FEE	750.00
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+140=		OR	+280=	
TOTAL		OR	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

1/20/04 CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	* 65	Minus	** 67	=
Independent	* 3	Minus	*** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X13=		OR	X86=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.